

WEAKLEY COUNTY REHABILITATION & NURSING CENTER  
P. O. BOX 787  
DRESDEN, TN 38225-0787  
PHONE – 731-364-3158  
FAX – 731-364-2792

WEAKLEY COUNTY EXECUTIVE  
HOUSTON PATRICK  
116 W. MAIN ROOM 106  
DRESDEN, TN 38225

November 5, 2013

Mr. Patrick,

Enclosed you will find a copy of the Weakley County Rehabilitation & Nursing Center Committee Board meeting dated October 28, 2013. A check for the amount of \$399.05 will be distributed as follows :

KEVIN MCALPIN	\$ 80.74
JOE FARMER	\$ 80.74
JULIA RICH	ABSENT
LARRY TAYLOR	\$ 76.09
DALE OVERTON	\$ 80.74
ROGER STEWART	\$ 80.74

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\$399.05

Thank you,



David McBride  
Administrator  
Weakley County Rehabilitation & Nursing Center

**RECEIVED**

**NOV - 8 2013**

**WEAKLEY COUNTY  
FINANCE**

**Weakley County Rehabilitation and Nursing Center  
Board Meeting  
October 28, 2013**

**Present:**

Mr. Kevin McAlpin, Chairman  
Mr. Joe Farmer, Vice Chairman  
Mr. Dale Overton  
Mr. Roger Stewart  
Mr. Larry Taylor  
Mr. Bradley Davis, Assistant Administrator  
Mr. David Fisher, Dresden Enterprise  
Mr. David McBride, Administrator

**Absent:**

Ms. Julia Rich

The monthly nursing home board meeting was opened by Chairman Mr. Kevin McAlpin at 5:00 p.m.

**Administrative**

The minutes from the September board meeting were reviewed. A motion was made by Mr. Roger Stewart to accept the minutes from the September board meeting, seconded by Mr. Joe Farmer, passed with all in favor.

The financial statements for August and September were reviewed by the board. After a short discussion a motion was made by Mr. Roger Stewart to accept the August and September financial statements, seconded by Mr. Dale Overton, passed with all in favor.

Administrator David McBride informed the board that Mr. Mark Downing had contacted him back regarding questions raised at the August board meeting. Mr. McBride also stated that Mr. Downing recommended that accounts over 120 days old should be reviewed for collectability. If there is substantial doubt that it will be collected then it should be written off. Even though write-offs would no longer be included in the accounts receivable listing, efforts can still be made to collect on those accounts.

Regarding investments, as outlined on page 13 of the audit report, State statute authorizes the nursing home to invest in bonds, notes, or treasury bills of the United States or any of its agencies, certificates of deposit at Tennessee state chartered banks and savings and loan associations and federally chartered banks and savings and loan associations, repurchase agreements utilizing obligations of the United States or its agencies as the underlying securities, and the State pooled investment fund. The State statute requires that all deposits with financial institutions must be collateralized by securities whose market value is equal to 105% of the failure of uninsured deposits.

Administrator David McBride informed the board that he had consulted with the County's attorney, Mr. Jeff Washburn regarding a charter for the nursing facility. Mr. Washburn stated that he had checked with the Tennessee Secretary of the State's website and did not find where the nursing home had ever been chartered. He also checked to see if any county owned nursing homes in Tennessee had been chartered and found none. Mr. Washburn said that since the facility is owned by the county it is entitled to receive the limited liability of the Governmental Tort Liability Act, which limits liability for non-exempt act to \$350,000.00 per incident.

Administrator David McBride discussed with the board his recommendation on funding the employee health insurance beginning January 01, 2014. He said that as he understands, the government will not be requiring employers to provide employees working thirty (30) hours or more per week health insurance coverage. The employee health insurance is estimated to cost the facility over \$800,000.00 from January of this year to the end of December. Looking ahead to January 2014 and beyond he recommends the facility change the percentage it pays toward health insurance. Some of the factors contributed to this are the rising cost of health insurance, the fact that the facility will probably have to offer health insurance to employees working thirty (30) hours or more in 2015, and the decline in census. With that in mind, he recommends the board pay 100% of the premium on the Limited PPO on the BCBST or CIGNA single coverage. The employee may choose to apply the employee only Limited CIGNA premium amount to the employee plus children, employee plus spouse, or the employee plus spouse plus children coverage. He discussed the coverage available under the Limited plans. With this change the facility would almost cut the facility's cost to approximately \$494,000.00. Although the policies are a 70/30 co-pay, and slight increase in prescriptions and office visits, the employees do not have to pay for the monthly premiums. He also stated that many of the employees have chosen to purchase vision and dental coverage with their health insurance at a small cost to them.

After a discussion a motion was made by Mr. Dale Overton to accept the recommendation by Administrator David McBride to have the facility pay 100% of the employee only premium of the BCBST or CIGNA or the employee only CIGNA premium amount to any other coverage type offered by the facility, seconded by Mr. Larry Taylor, passed with all in favor. This will become effective January 01, 2014.

Administrator David McBride informed the board that the facility had received letters from the Comptroller of the Treasury of Medicaid Level 1 and Level 2 rates effective retroactively to July 01, 2013.

The Medicaid Level 1 daily rate increased by \$5.50 from \$165.07 to \$170.57 and the Medicaid Level 2 rate decreased by \$1.32 from \$178.41 to \$177.09. Based on these figures and the current census the facility should see an increase in revenue for the fiscal year of \$158,260.00.

Based on the new rates Mr. McBride recommended that the board increase the Private level 1 rate from \$170.00 to \$175.00 per day effective December 01, 2013 and to keep the Private level 2 rate at \$185.00. He said that the new Medicaid rates are based on the

2011-2012 costs' reports. The total increase of the Private level 1 rate would add \$12,700.00 to the Private level 1 income for the operating year based on the current census.

After a short discussion a motion was made by Mr. Kevin McAlpin to increase the Private Level 1 daily room rate effective December 01, 2013 from \$170.00 to \$175.00 and to keep the Private Level 2 daily room rate at \$185.00, seconded by Mr. Roger Stewart, passed with all in favor except Mr. Joe Farmer who voted no.

Administrator David McBride informed the board that he and Mr. Bradley Davis, Assistant Administrator had reviewed automated time clocks that sent information directly into the new computer payroll software instead of having department supervisors figure each employee time card by hand. Mr. Davis stated that by adding this system it will also do away with the payroll personnel from entering time into the computer. Not only will it assist in reducing human error it will allow the facility to monitor work hours more closely, especially overtime. The cost of the new time clock system is \$7,258.00. Included in the total is the first year's annual maintenance service agreement, there after there is a yearly services agreement of \$746.00.

After a short discussion a motion was made by Mr. Dale Overton to purchase the time clock with the service agreement, seconded by Mr. Joe Farmer, passed with all in favor.

### **Building and Grounds**

Administrator David McBride informed the board that there was an area of the wood flooring on west hall that needed floor joists replaced and concrete bell jacks installed. The expense should not exceed \$3,500.00.

The exterior building, walks, and the employee break area have been pressured washed.

### **Resident Care**

Administrator David McBride informed the board that the current census was at 100 residents.

A motion to adjourn was made by Mr. Roger Stewart, seconded by Mr. Joe Farmer, passed with all in favor.

Rec-  
10/21/13  
mll



STATE OF TENNESSEE  
COMPTROLLER OF THE TREASURY  
DEPARTMENT OF AUDIT  
DIVISION OF STATE AUDIT  
SUITE 1500  
JAMES K. POLK STATE OFFICE BUILDING  
NASHVILLE, TENNESSEE 37243-0264  
PHONE (615) 401-7897  
FAX (615) 532-2765

October 18, 2013

Administrator  
Weakley County Nursing Home  
P. O. Box 787  
Dresden, TN 38225

SUBJECT: Nursing Facility-Level 1 Per Diem Rate – 744-0201

Dear Administrator:

In accordance with the rules of the Tennessee Department of Finance and Administration, a reimbursement per diem rate of \$170.57 has been established for your facility effective July 1, 2013.

The statewide ceiling rate, excluding the passthrough for the annual nursing home tax, is \$164.47 per patient day effective July 1, 2013. This ceiling is based on the allowable cost of the facility at the 65<sup>th</sup> percentile of all facilities that have filed a cost report covering actual operations.

Your established rate includes return on equity, incentive for cost containment and sprinkler system cost if your facility qualifies for these items. In addition, your rate includes a \$6.10 per day passthrough for the annual nursing home tax.

**If you have any questions concerning your rate, you may contact me at (615) 747-5204.**

Sincerely,

*Donna Crutcher*

Donna Crutcher, CPA  
Audit Manager

DC/pn

October 9, 2013

COMPTROLLER OF THE TREASURY  
DIVISION OF STATE AUDIT  
1600 JAMES K. POLK BUILDING  
NASHVILLE, TN 37243-0264

Nursing Facility Level 1 Rate Computation  
Effective July 1, 2013

Provider Name: WEAKLEY COUNTY NURSING HOME  
Provider Number: 744-0201                      Occupancy Factor 0.95  
Period Covered: 7/1/2013 - 6/30/2014

A	Computed Per-Diem Before Incentive (effective 7/1/12)	\$171.16
B	Per-diem Capital-Related Cost	\$2.80
C	Program Wide Ceiling, July 1, 2013	\$164.47
D	Controllable Cost (A - B)	\$168.36
E	Per-diem Cost Containment (C - D)	\$0.00
F	Per-diem Cost Containment Incentive: Line E x 50%. If Line E is zero or less, or if occupancy is less than 80%, no incentive is allowed.	\$0.00
G	Incentive Allowed (lower of F or \$3.00)	\$0.00
H	Computed Rate Before Applying Ceiling (line A plus line G)	\$171.16
I	Computed Rate Before Add on Adjustments (lower of C or H)	\$164.47
J	Tax Pass-Through	\$6.10
K	Sprinkler Pass-Through	\$0.00
L	Computed Rate Including Tax (I + J + K)	\$170.57

Rec.  
10/21/13  
MLB



STATE OF TENNESSEE  
COMPTROLLER OF THE TREASURY  
DEPARTMENT OF AUDIT  
DIVISION OF STATE AUDIT  
SUITE 1500  
JAMES K. POLK STATE OFFICE BUILDING  
NASHVILLE, TENNESSEE 37243-0264  
PHONE (615) 401-7897  
FAX (615) 532-2765

October 18, 2013

Administrator  
Weakley County Nursing Home  
P. O. Box 787  
Dresden, TN 38225

SUBJECT: Nursing Facility-Level 2 Per Diem Rate – 044-5437

Dear Administrator:

In accordance with the rules of the Tennessee Department of Finance and Administration, a reimbursement per diem rate of \$177.09 has been established for your facility effective July 1, 2013.

The statewide ceiling rate, excluding the passthrough for the annual nursing home tax, is \$178.86 per patient day effective July 1, 2013. This ceiling is based on the allowable cost of the facility at the 65<sup>th</sup> percentile of all facilities that have filed a cost report covering actual operations.

Your established rate includes return on equity, incentive for cost containment and sprinkler system cost if your facility qualifies for these items. In addition, your rate includes a \$6.10 per day passthrough for the annual nursing home tax.

**If you have any questions concerning your rate, you may contact me at (615) 747-5204.**

Sincerely,

Donna Crutcher, CPA  
Audit Manager

DC/pn

October 10, 2013

COMPTROLLER OF THE TREASURY  
DIVISION OF STATE AUDIT  
1600 JAMES K. POLK BUILDING  
NASHVILLE, TN 37243-0264

Nursing Facility Level 2 Rate Computation  
Effective July 1, 2013

Provider Name: WEAKLEY COUNTY NURSING HOME  
Provider Number: 044-5437                      Occupancy Factor: 0.95  
Period Covered: 7/1/2013 - 6/30/2014

A	Computed Per-Diem Before Incentive (effective 7/1/13)	\$170.99
B	Per-diem Capital-Related Cost	\$2.87
C	Program Wide Ceiling, July 1, 2013	\$178.86
D	Controllable Cost (A - B)	\$168.12
E	Per-diem Cost Containment (C - D)	\$10.74
F	Per-diem Cost Containment Incentive: Line E x 50%. If Line E is zero or less, or if occupancy is less than 80%, no incentive is allowed.	\$0.00
G	Incentive Allowed (lower of F or \$3.00)	\$0.00
H	Computed Rate Before Applying Ceiling (line A plus line G)	\$170.99
I	Computed Rate Before Add on Adjustments (lower of C or H)	\$170.99
J	Tax Pass-Through	\$6.10
K	Sprinkler Pass-Through	\$0.00
L	Computed Rate Including Tax (I + J + K)	\$177.09



Weakley County Trustee  
Miscellaneous Receipt

Description: N H MEETING  
Date: 11/08/2013  
Initials: LP  
Drawer No: 0003  
Pay Method: OVER THE COUNTER

Receipt No: 0000256  
Amount: 399.05  
Tendered: 399.05  
Change: 0.00

Rcvd Of: W C NURSING HOME/CO EX      CHECK 37854      399.05

Revenue Code: 49800      101 TRANSFERS IN      399.05

RECEIVED BY:LP

\*\*\* DUPLICATE \*\*\*

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